# L23000217744

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(=,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

Office Use Only



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# **COVER LETTER**

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<b>TO:</b> New Filing S Division of C				
SUBJECT: RED FO	X GENERAL SERVICE	S LLC		
50b0ffC1.	(Name of Re	sulting Florida Lim	ited Cor	npany)
				nd fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
YANI DA SILVA				
	(Contact Person)			
AQUI SOLUTIONS LL	С			
	(Firm/Company)		_	
500 OAKFORD ROAD	)			
	(Address)		<del></del>	
SARASOTA, FL 34240	)			
(1	City. State and Zip Code)		_	
YANI, AQUISOLUTION	IS@GMAIL.COM			
E-mail Address: (to b	e used for future annual re	port notifications)	_	
For further informati	on concerning this ma	tter, please call:		
YANI DA SILVA		at ( <sup>941</sup>	,404-	7413
(Name of Conta	ict Person)		2) (Day	rtime Telephone Number)
	or the following amou a bank located in the		proces	sed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co	-	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add New Filing S Division of C P.O. Box 632	ection orporations		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee
Tallahassee, I				N. Monroe Street, Suite 810

Tallahassee, FL 32303

# **Articles of Conversion**

For

# "Other Business Entity"

Into

# Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  RED FOX GENERAL SERVICES INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
10/14/2014
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
RED FOX GENERAL SERVICES LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S.

Signed this 2	8TH day of MARCH	20 <u>23</u>
Signature of	Authorized Representative of	Limited Liability Company:
		and)
Signature of A	Authorized Representative:	WILL MCD
Printed Name	AMARAL, OFFNE V	Title: MGR
Signature(s)	on behalf of Other Business En	tity: [See below for required signature(s)]
Signature:	AMARAL, OFFNE V	
Printed Name	AMARAL, OFFNE V	Title: MGR
Signature:	Cruban Santo	
Printed Name	SANTOS, CRISTIANE A	Title: MGR
Signature:		Title:
Printed Name	:	Title:
Signature:		
Printed Name	:	Title:
Signature:		
Printed Name		Title:
Cionatura		
Printed Name		Title:
	· · · · · · · · · · · · · · · · · · ·	
If Florida Co		
	Chairman, Vice Chairman, Direct	
If Directors of	r Officers have not been selected.	an Incorporator must sign.
If Florida Ge	eneral Partnership or Limited I	iability Partnership:
	one General Partner.	
	mited Partnership or Limited L	iability Limited Partnership:
Signatures of	ALL General Partners.	
All others:		
	in authorized person.	
S		
Fees:		
A ــــــــــــــــــــــــــــــــــــ	es of Conversion:	\$25.00
	es of Conversion: for Florida Articles of Organizat	\$25.00 ion: \$125.00
	ied Copy:	\$30.00 (Optional)
	icate of Status:	\$5.00 (Optional)
JU. 111		

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<b>ARTICLE I - Name:</b> The name of the Limited Liability Company is:	
RED FOX GENERAL SERVICES LLC	
(Must contain the words "Limited Liabilit	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1772 MOVA ST, SARASOTA, FL 34231	1772 MOVA ST,
	SARASOTA, FL 34231
business entity with an active Florida registration.)  The name and the Florida street address of the r  OFFNE V AMARAL	registered agent are:
Name	e
	e
Name  1772 MOVA ST  Florida street address (P.O	
1772 MOVA ST	. Box <u>NOT</u> acceptable)
1772 MOVA ST Florida street address (P.O	

(CONTINUED)

# ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

• • •

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	OFFNE V AMARAL
	1772 MOVA ST, SARASOTA, FL 34231
MGR	CRISTIANE A SANTOS
	1772 MOVA ST, SARASOTA, FL 34231
	<del> </del>
	<del></del>
/II	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)  CLE V: Other provisions, if any.	
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CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware 1
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a docu	with section 605.0203 (1) (b), Florida Statutes. I am aware to ment to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes, I am aware to ment to the Department of State constitutes a third degree fellow.
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